

# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved  
Office of Management  
and Budget  
No 1215-0188  
Expires 11 30-2006

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440

For Official Use Only



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U <u>9917</u>	2 Fiscal Year Covered From <u>1</u> / <u>1</u> / <u>2004</u> Through <u>12</u> / <u>31</u> / <u>2004</u>
3 Name and address of person filing Name <u>Patrick A Beekma</u> P O Box Bldg Room No if any _____ Street <u>2233 Birch Street</u> City <u>Eau Claire</u> State <u>Wisconsin</u> ZIP Code + 4 <u>54703</u>	4 Name file number and address of labor organization Name <u>Northern WI Regional Council of Carpenters</u> Labor Organization File Number <u>035-751</u> P O Box Building and Room Number if any _____ Street <u>N2216 Bodde Road</u> City <u>Kaukauna</u> State <u>Wisconsin</u> ZIP Code + 4 <u>54130-9740</u>
5 Position in labor organization <u>Business Representative</u>	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests  
(except as specified in the exclusions set forth in the instructions)

A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6 Name and address of Employer (including trade name if any) Name _____ Trade Name if any _____ P O Box Bldg Room No if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7 a Nature of Interest, Transaction or Income _____ 7 b Amount _____

Signature

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions)

Signed Patrick A Beekma

On 8-12-05  
Date

715-835-8892  
Telephone Number

Name of Person Filing <b>Patrick Beeksa</b>	File Number <b>U</b>
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**B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested**

<b>8 Name and address of Business (including trade name if any)</b>  Name <b>Wisconsin Carpenters Fringe Benefits Fund</b>  Trade Name if any  P O Box Bldg Room No if any <b>P O Box 4002</b>  Street <b>1704 McCann Drive</b>  City <b>Altoona</b>  State <b>Wisconsin</b> ZIP Code + 4 <b>54720</b>	<b>9 Business deals with</b>  <input checked="" type="checkbox"/> a Labor Organization  <input type="checkbox"/> b Trust  <input type="checkbox"/> c Employer												
<b>10 If 9 b or 9 c is checked give trust or employer's name</b>  Name  Trade Name if any  P O Box, Bldg Room No if any  Street  City  State  ZIP Code + 4 	<b>11 a Nature of such dealing</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Quarterly Trust Fund Meeting</td> </tr> <tr> <td colspan="2">Health Fund</td> </tr> <tr> <td>01/14/2004</td> <td>\$4~ 48</td> </tr> <tr> <td>04/08/2004</td> <td>\$51 84</td> </tr> <tr> <td>07/29/2004</td> <td>\$49 10</td> </tr> <tr> <td>10/28/2004</td> <td>\$68 88</td> </tr> </table> <b>11 b Approximate dollar value of such dealing</b> <span style="float: right;"><b>\$213</b></span>  <b>12 a Nature of interest held or income received</b> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <b>12 b Amount</b> <span style="float: right;"><div style="border: 1px solid black; width: 100px; height: 20px;"></div></span>	Quarterly Trust Fund Meeting		Health Fund		01/14/2004	\$4~ 48	04/08/2004	\$51 84	07/29/2004	\$49 10	10/28/2004	\$68 88
Quarterly Trust Fund Meeting													
Health Fund													
01/14/2004	\$4~ 48												
04/08/2004	\$51 84												
07/29/2004	\$49 10												
10/28/2004	\$68 88												

**C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value**

<b>13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)</b>  Name  Trade Name if any  P O Box Bldg Room No if any  Street  City  State  ZIP Code + 4 	<b>14 a Nature of payment.</b> <div style="border: 1px solid black; height: 150px; width: 100%;"></div> <b>14 b Amount of payment</b> <span style="float: right;"><div style="border: 1px solid black; width: 100px; height: 20px;"></div></span>
<b>13 b Is the Business an Employer</b> <input type="checkbox"/> <b>or Consultant</b> <input type="checkbox"/> <b>?</b>	

Name of Person Filing <b>Patrick Beekma</b>	File Number <b>U</b>
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**Part B Continuation Page**

**B** Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

<p><b>8 Name and address of Business (including trade name if any)</b></p> <p>Name <b>Wisconsin Carpenters Fringe Benefit Fund</b></p> <p>Trade Name if any <input style="width: 150px;" type="text"/></p> <p>P O Box Bldg Room No if any <b>P O Box 4002</b></p> <p>Street <b>1704 McCann Drive</b></p> <p>City <b>Altoona</b></p> <p>State <b>Wisconsin</b> ZIP Code + 4 <b>54720</b></p>	<p><b>9 Business deals with</b></p> <p><input checked="" type="checkbox"/> a Labor Organization</p> <p><input type="checkbox"/> b Trust</p> <p><input type="checkbox"/> c Employer</p>
<p><b>10 If 9 b or 9 c is checked give trust or employer's name</b></p> <p>Name <input style="width: 150px;" type="text"/></p> <p>Trade Name if any <input style="width: 150px;" type="text"/></p> <p>P O Box Bldg Room No if any <input style="width: 150px;" type="text"/></p> <p>Street <input style="width: 150px;" type="text"/></p> <p>City <input style="width: 150px;" type="text"/></p> <p>State <input style="width: 150px;" type="text"/> ZIP Code + 4 <input style="width: 150px;" type="text"/></p>	<p><b>11 a Nature of such dealing</b></p> <div style="border: 1px solid black; padding: 5px; min-height: 100px;"> <p>12/04/2004 International Foundation Conference</p> </div> <p><b>11 b Approximate dollar value of such dealing</b> <span style="float: right;"><b>\$3 799</b></span></p> <p><b>12 a Nature of interest held or income received</b></p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p><b>12 b Amount</b> <span style="float: right;"><input style="width: 100px;" type="text"/></span></p>

Name of Person Filing Patrick Beeksm	File Number U
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Part B Continuation Page

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<b>8 Name and address of Business (including trade name if any)</b> Name Turner Investment Partners Trade Name if any P O Box Bldg Room No if any Suite 100 Street 1205 West Lakes Drive City Berwyn State Pennsylvania ZIP Code + 4 19312	<b>9 Business deals with</b> <input checked="" type="checkbox"/> a Labor Organization <input type="checkbox"/> b Trust <input type="checkbox"/> c Employer
<b>10 If 9 b or 9 c is checked give trust or employer's name</b> Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	<b>11 a Nature of such dealing</b> 12/01/2004 Trust Fund Reception (attended with spouse)  <b>11 b Approximate dollar value of such dealing</b> \$180 <b>12 a Nature of interest held or income received</b>  <b>12 b Amount</b>

Name of Person Filing <b>Patrick Beekma</b>	File Number <b>U</b>
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**Part B Continuation Page**

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<p><b>8 Name and address of Business (including trade name if any)</b></p> <p>Name <b>Alliance Bernstein Investment Management</b></p> <p>Trade Name if any</p> <p>P O Box Bldg Room No if any</p> <p>Street <b>1345 Avenue of the Americas</b></p> <p>City <b>New York</b></p> <p>State <b>New York</b> ZIP Code + 4 <b>10105</b></p>	<p><b>9 Business deals with</b></p> <p><input checked="" type="checkbox"/> a Labor Organization</p> <p><input type="checkbox"/> b Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10 If 9 b or 9 c is checked give trust or employer's name</b></p> <p>Name</p> <p>Trade Name if any</p> <p>P O Box Bldg Room No if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11 a Nature of such dealing</b></p> <p><b>12/02/2004 Reception (attended with spouse)</b></p> <p><b>11 b Approximate dollar value of such dealing</b> <b>\$250</b></p> <p><b>12 a Nature of interest held or income received</b></p> <p><b>12 b Amount</b></p>

Name of Person Filing <b>Patrick Beeksma</b>	File Number <b>U</b>
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**Part B Continuation Page**

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<p><b>8 Name and address of Business (including trade name if any)</b></p> <p>Name <b>Weiss Peck &amp; Greer Investments</b></p> <p>Trade Name if any</p> <p>P O Box Bldg Room No if any</p> <p>Street <b>909 Third Avenue</b></p> <p>City <b>New York</b></p> <p>State <b>New York</b> ZIP Code + 4 <b>10022</b></p>	<p><b>9 Business deals with</b></p> <p><input checked="" type="checkbox"/> a Labor Organization</p> <p><input type="checkbox"/> b Trust</p> <p><input type="checkbox"/> c Employer</p>
<p><b>10 If 9 b or 9 c is checked give trust or employer's name</b></p> <p>Name</p> <p>Trade Name if any</p> <p>P O Box Bldg Room No if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11 a Nature of such dealing</b></p> <p>Luncheon</p> <p>{</p>
	<p><b>11 b Approximate dollar value of such dealing</b> \$57</p>
	<p><b>12 a Nature of interest held or income received</b></p>
	<p><b>12 b Amount</b></p>



August 11, 2005

The transactions, dealings and interests that are reported in the attached LM-30 represent my good faith effort to reconstruct any reportable occurrences for calendar year 2004. Some items may have been unintentionally omitted. If, in the future, it comes to my attention that there is a matter which should have been reported for calendar year 2004, I will file an amended Form LM-30.

Sincerely,

Patrick A. Beeksma  
Business Representative